Office of the Sheriff Contra Costa County

APPLICATION FOR CARDROOM EMPLOYEE WORK PERMIT

| Date: | NEW | RE | NEWAL | | |
|---|-------------------------|----------------|----------------------------|-----------|--|
| True Name: (Last, First, Mi | ddle) | | | | |
| | Telephone: | | | | |
| Mailing Address: | | | | | |
| | Social Security No | | | | |
| Date of Birth: | Place of Birth: | | Citizenship: | | |
| Sex: (M/F) Height: | Weight: | Hair: _ | Eyes: | | |
| Employer: | Employer's Address: | | | | |
| Employer's Telephone: | | | | | |
| Other Employer other than | above establishment: N | ame: | | | |
| Address: | | Telephor | ne: | | |
| Is this application for a mar | nager's position: (Y N) | | | | |
| Have you ever been convict | ted of a crime? (Y N) D | o you have a | case pending in court no | ow? (Y N) | |
| "I understand that false stat perjury. I certify under pen Applicant's signature: | _ | | on this application are tr | | |
| PHOTOGRAPHS [| FINGERPRIN | ITS 🗆 | CRIM. HIST. RCD. | | |
| Application Fee Pai | d: | New/Renew | al Fee Paid: | | |
| Date Permit Granted: | Date Pe | ermit Denied o | or Revoked: | | |
| Date of Renewal: | | | | | |
| | | | | | |

Permit Number:

Application for Cardroom Employee Work Permit

History Information

| Name: | | Date: | | |
|----------------|---|------------------------------|--------------------------------------|-------------|
| If you have n | ot resided at your present le | ocal address for the past tw | o (2) years, list previous addresses | |
| Address: | | City: | Dates: | |
| Address: | | City: | Dates: | |
| Address: | | City: | Dates: | |
| | dates of incidents, locationing in court now. | n and arrest/convictions you | ı have had. Also indicate all crim | inal |
| Date | Crime(s) | Location | Arrest/Conviction | |
| Date | Crime(s) | Location | Arrest/Conviction | |
| Date | Crime(s) | Location | Arrest/Conviction | |
| Have you eve | | than what is listed above? | (Y N) | |
| | | | | |
| I certify unde | r penalty of perjury that sta | atements made on this appli | cation are true. | |
| Signature of A | Applicant: | | Date: | |